

IV. The nurse should keep a close watch on the temperature, pulse, respirations, and general condition during the critical stage of the secondary fever. Many cases may be saved at this period by proper treatment. Yours truly,

LIZZIE C. RITCHIE, Ottawa, Ont.

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DEAR EDITOR: In answer to E. V.'s questions as to the treatment of small-pox, prevention of scarring, etc., I would say that I have nursed some twenty-eight cases during the late epidemic and find that the best treatment is absolute cleanliness. Complications must be treated as they arise. There is no "set" rule in the treatment of this disease.

II. In my experience I have tried many remedies to prevent scarring, but found none of any actual benefit. "Pitting" is bound to occur in severe cases, and can only be removed by subsequent treatment by a skin specialist.

III. Time alone will remove the "red spots."

IV. The first symptoms to be observed are headache, chills with accompanying fever, severe pain in the back, low down, usually in the region of the kidneys, rapid pulse, and often delirium. This condition lasts three or four days, when the rash appears on the forehead and arms. On the forehead particularly the spots feel like shot under the skin. The temperature drops now and remains down along the normal line until the eighth or ninth day, when the vesicles become pustular and we have a secondary rise of temperature. At this stage the eyes must be carefully watched and kept very clean. Sometimes it is necessary to wash them with some medicated solution every fifteen minutes—to prevent ulceration of cornea. About the twelfth day the pustules begin to dry off and the period of convalescence is reached. The complications most dreaded are albuminuria, pneumonia, sore throat, and diarrhoea.

E. T. M., Philadelphia.

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DEAR EDITOR: Through the columns of THE AMERICAN JOURNAL OF NURSING I want to reach every superintendent of Eastern training-schools to inform them of a pleasant feature that may be added to their journey to Detroit when they come to our convention in September.

The Detroit and Buffalo Steamboat Company is operating a daily service between those two cities via Lake Erie. Its steamers are the Eastern States and the Western States, and they are palatial, "up-to-date" boats. They leave Buffalo at five-thirty P.M., arrive in Detroit at seven-thirty A.M.; leave Detroit at four P.M. and arrive in Buffalo at seven-thirty A.M. The route connects with all the main railroad lines, and through tickets can be bought in Eastern or Western cities, thus providing for all transfers of passengers and baggage from depot to wharf.

The cost is three dollars less than by railway. Briefly expressed, those are the salient features that recommend the trip, but they embrace a small part of the delightful experiences of the journey. Coolness, cleanliness, and comfort are accompaniments, and it is worth a long trip to enjoy one such restful night in the cosy, roomy state-room with its wide berths and other nice appointments.

The meals, let me add, are extra, a la carte, excellent in quality and beautifully served.

I wish all of our visitors might obtain their first view of the historic old "City of the Straits" from the Detroit River front, for it is such a lovely approach. However, no matter in what manner they come, they can all be assured of a warm welcome.

I cannot find words to tell you how much we appreciate the JOURNAL. It certainly meets the needs of the nurse in her private and public relationships, and is a great factor in her education. Yours very sincerely,

L. E. GREYTER.

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DEAR EDITOR: In these days of great improvements in methods of nursing we hear of various means to raise the standards of the training-schools; in plain words, to discourage those applicants whose education and intelligence are too limited for the needs of the work, whose motives in taking it up are frivolous, and whose characters render them unfit for the calling of a trained nurse, and to encourage those women whose aims are high and earnest, who have the requisite measure of education, refinement, and character, with a sincere love of their chosen work. Some hospitals have adopted the three-years' course, others make their entrance examinations less simple, and the months of probation more difficult, while others, *we hear*, have chosen the non-remuneration system. Now I can quite understand that a three-years' course would easily discourage the lazy or frivolous and those of ignoble purpose, that the entrance examinations would weed out the uneducated, and that the increased vigilance during the probation months would reveal the poor characters, the lack of refinement and dignity, and the want of interest in their work.

But will you tell me in what way does "no remuneration" during those hard years of training improve the standard? Does it, then, mean that the woman who possesses more dollars has the qualities of a nurse in excess of her poorer sister? These are some of the remarks I have heard of late with reference to such a system: "A most excellent thing, the standard will be higher for it." "I am glad to hear of it, for more nurses now will take the training for *itself*," or "I think it a very good thing to keep *those kind* of people out" (*this* in reference to women who cannot afford to spend three years without ready money for personal expenses). Perhaps we have got to abuse the expression "raise the standard," and that we use it sometimes without reflection. I plead guilty to doing so myself, and weakly agreeing with the first speaker, but I went home and thought over it, and now I confess I was quite wrong.

How many young women take a nurse's course in a hospital for the sake of the paltry sum of seven or ten dollars a month? None, I feel sure, for were the wage their only object, they could certainly choose a less arduous occupation. The nurse who does her work *conscientiously* during the years of training quite earns not only the knowledge which practical experience and teaching bring her, but the modest sum as well which helps to cover her personal expenses. Many an excellent nurse could never have taken her training if she could not have had the means of defraying the expense of clothing, books, etc.

Take an orphan, for instance, who, being without natural providers, would have to depend, perhaps, on the ungracious bounty of other relatives instead of enjoying the independence which her own earnings would bring her. Or the well-bred, well-educated daughter of a widow in reduced circumstances—must she be considered below the "standard" if she choose, for material reasons, a hospital where some remuneration be given? I dare say, if we but knew it, there are many undergraduates who out of the meagre monthly wage contrive to send home a few dollars now and then, besides saving for their vacation and graduation.

By all means, let there be hospitals in which for their own good reasons